20-5-07-29-0M-000-4962

FE6AN026

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER

2015 JUL 29 PM 12: 19

Office Use Only

1.	NAME OF	= TEE (in full)	TYPE OR PRINT ▼		mple: If typing, r the lines.	type 1	2FE4M	5		
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2.	FEC IDE	NTIFICATION N	UMBER ▼	CITY		ST	ATE A		ZIP COD	DE 🛦
	C 0	0 1 1 7 6	1 4	3. IS THIS REPORT	NE (N)			MENDED A)		
4.	TYPE (OF REPORT	(b) Monthly Report	Feb 20 (M2)	Ма	ay 20 (M5)	Au	g 20 (M8)		Nov 20 (M11) (Non-Election Year Only)
	(a) Quai	terly Reports:	Due On:	Mar 20 (M3)	Jui	n 20 (M6)	Se	p 20 (M9)		Dec 20 (M12) (Non-Election Year Only)
	_	April 15		Apr 20 (M4)	Jul	1 20 (M7)	00	t 20 (M10)		Jan 31 (YE)
	Ц	Quarterly Report (Q1) (c) 12-Day		Primary (12P)	П	Genera	l (12G)	П	Runoff (12R)
	Ц	July 15 Quarterly Report (Q2) PRE-Election Report for the		Convention (12	20	Special	(12S)	_	
		October 15 Quarterly Report (,	-' L		(/		
		January 31 Year-End Report (YE) [Election on	M M /	D D / Y	• • • •]	in the State of	
		July 31 Mid-Year Report (Non-election Year Only) (MY)	POST-Elect	L.J	General (30G)		Runoff	(30R)		Special (30S)
		Termination Repor (TER)		Election on	N ■ N /	D D / V	****		in the State of	
5.	Covering	Period 0	1 0 1 2 0) 1 Š	through	0 6	3 0	20	1 5	
l ce	ertify that I	have examined t	this Report and to the b	=	wledge and be	elief it is true	, correct a	nd complete	e.	
Тур	e or Print	Name of Treasure	er Scott McEntee							
Sig	nature of	Treasurer	MM	A)		Da	te 0	7 1	ِ 5 ′	2 0 1 5
NO	TE: Submis	ssion of false, erro	neous, or incomplete info	mation may s	ubject the perso	n signing this	Report to	the penaltie	es of 2 L	J.S.C. §437g.
ı	Off Us								FOR ev. 12/20	

2015-07-29-03-00014963

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Farmers Mutual Hail Insurance Company of Iowa Political Action Committee Report Covering the Period: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 4 6 6 3 8 4 _0_1_5 January 1, (b) Cash on Hand at 6 3 8 4 Beginning of Reporting Period...... 7 4 9 7 7 4 9 7 2 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 5_1_6_5_0_0 7. Total Disbursements (from Line 31)......... Cash on Hand at Close of Reporting Period 4 8 9 7 0 6 4 8 9 7 0 6 7 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

FE6AN026

2015:07:29:0M:00014964

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Farmers Mutual Hall Insurance Company of Iowa Political Action Commit	ual Hail Insurance Company of Iowa Political Action Commi	cal Action	a Political	of lowa	Company	Insurance	Hail	Mutual	Farmers
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Report Covering the Period: From:	1 3 1 2 0 1 5 To	$0.6 \frac{0.6}{3.0} \frac{2.0.1.5}{2.0.1.5}$
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:		
(a) Individuals/Persons Other	·	
Than Political Committees	2,6,8,9,4,0	268940
(i) Itemized (use Schedule A)		<u> </u>
(ii) Unitemized	480784	480784
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	7,49724	7,4972
(b) Political Party Committees		
(c) Other Political Committees		
(such as PACs)(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)▶	7,497,24	7,4.9.7,2.
. Transfers From Affiliated/Other		
Party Committees	5-1-00 8 1 00 8 1 CO 1	
. All Loans Received		
. Loan Repayments Received		
. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	A A /2_ A A /2_ A	
to Federal Candidates and Other		
Political Committees		
. Other Federal Receipts		
(Dividends, Interest, etc.)		
. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account		
(from Schedule H3)		
(b) Levin Funds (from Schedule H5)		
(c) Total Transfers (add 18(a) and 18(b))		
(c) Total Transiers (and Tota) and Total)		
Total Dessints (add Lines 44/4)		
. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	7,497,24	7,497.2
Total Fodoral Pagaints		
 Total Federal Receipts (subtract Line 18(c) from Line 19) 	7 4 9 7 2 4	7 4 9 7 2
(Subtract Line 10(c) non Line 13/		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share	Total Tills Fellow	Calendar Teal-to-Date
	(ii) Non-Federal Share(b) Other Federal Operating		
	Expenditures	65,00	6500
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	6500	6500
22.	Transfers to Affiliated/Other Party		
23	CommitteesContributions to		
20.	Federal Candidates/Committees and Other Political Committees	5,100,00	5,100,00
	Independent Expenditures		
25.	(use Schedule E)		
26.	Loan Repayments Made		
	Loans Made		
	Also Deliking L Denky Committee		
	(b) Political Party Committees(c) Other Political Committees		
	(such as PACs)		
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶		
29.	Other Disbursements	73-1-1-23	
30.	Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity (from Schedule H6) (i) Federal Share		
	(ii) "Levin" Share(b) Federal Election Activity Paid Entirely With Federal Funds		
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶		
31.	Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	5,165,00	5,16,5,00
32.	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		المونمت من المن المن
	from Line 31)	5,16500	5,16500

DETAILED SUMMARY PAGE

of Disbursements

Page 5 FEC Form 3X (Rev. 02/2003) COLUMN A COLUMN B III. Net Contributions/Operating Ex-**Total This Period** Calendar Year-to-Date penditures 33. Total Contributions (other than loans) (from Line 11(d), page 3) 34. Total Contribution Refunds (from Line 28(d)) 35. Net Contributions (other than loans) · (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures 6 5 6 (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures (from Line 15, page 3)..... 38. Net Operating Expenditures (subtract Line 37 from Line 36)

В.

C.

City

SCHEDULE A	(FEC Form	3X)
ITEMIZED REC	EIPTS	

NAME OF COMMITTEE (In Full)

Mailing Address

Waukee

Receipt For:

City

240 Linden Drive

FEC ID number of contributing

Farmers Mutual Hail Ins. Co.

General

federal political committee.

Other (specify)

FEC ID number of contributing

Farmers Mutual Hail Ins. Co.

General

federal political committee.

Other (specify)

2273 NE 88th Street

Altoona, Iowa 50009

FEC ID number of contributing

Farmers Mutual Hail Ins. Co.

General

federal political committee.

Other (specify)

Name of Employer

Primary

Receipt For:

Name of Employer

Primary

Mailing Address

Receipt For:

Full Name (Last, First, Middle Initial)

Name of Employer

Primary

Mailing Address

FOR LINE NUMBER: PAGE 1 OF 4 Use separate schedule(s) (check only one) for each category of the 11a 11b 12 11c **Detailed Summary Page** 13 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. Farmers Mutual Hail Insurance Company of Iowa Political Action Committee Full Name (Last, First, Middle Initial) Rutledge, Ronald P. Date of Receipt Payroll Deduction State Zip Code Iowa 50263 Amount of Each Receipt this Period 5068 Occupation President FMH Aggregate Year-to-Date ▼ 5 0 6 8 8 Date of Receipt Payröll Deduction State Zip Code Amount of Each Receipt this Period 0 0 1 1 7 6 1 4 Occupation CFO FMH Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Rutledge, Shannon Date of Receipt Payroll Deduction State Zip Code Amount of Each Receipt this Period 0 0 1 1 7 6 1 4 Occupation SVP FMH Aggregate Year-to-Date ▼ 3 4 1 4

В.

SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	,	

FOR LINE NUMBER: PAGE 2 of **4** Use separate schedule(s) (check only one) for each category of the 11a 11b 11c 12 **Detailed Summary Page** 13 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Farmers Mutual Hail Insurance Company of Iowa Political Action Committee Full Name (Last, First, Middle Initial) Faga, Patrick Date of Receipt Mailing Address 735 Roosevelt Street Payroll Deduction City State Zip Code Story City, Iowa 50248 Amount of Each Receipt this Period FEC ID number of contributing 3 0 1 3 federal political committee. Name of Employer Occupation SVP FMH Farmers Mutual Hail Ins. Co. Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) Ladehoff, Debbie Date of Receipt Mailing Address 2676 Brookview LN 02/07/2015 City State Zip Code Van Metter, IA 50261 Amount of Each Receipt this Period FEC ID number of contributing C 0 0 1 1 7 6 1 0 0 0 0 federal political committee. Name of Employer Occupation Farmers Mutual Hail Ins. Co. VP/Asst Secretary Receipt For: Aggregate Year-to-Date ▼ Primary General 3_0_0,0_0 Other (specify) Full Name (Last, First, Middle Initial) Johnson, Kevin Date of Receipt Mailing Address 1783 Maple Ct Payroll Deduction State Zip Code Winterset, IA. 50273 Amount of Each Receipt this Period FEC ID number of contributing 0_0_1_1_7_6_1_4 2 0 4 federal political committee. Name of Employer Occupation **VP Sales** Farmers Mutual Hail Ins. Co. Receipt For: Aggregate Year-to-Date ▼ Primary General 2 2 0 4 0 Other (specify) SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only)......

SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	;	

FOR LINE NUMBER: PAGE 3 of **4** Use separate schedule(s) (check only one) for each category of the 11a 11b 12 11c **Detailed Summary Page** 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Farmers Mutual Hail Insurance Company of Iowa Political Action Committee Full Name (Last, First, Middle Initial) Ewart, Larry Date of Receipt Mailing Address 15188 Bryn Mawr Payroll Deduction State Zip Code City Clive, IA. 50325 Amount of Each Receipt this Period FEC ID number of contributing 2 3 0 0 1 1 7 6 1 4 federal political committee. Name of Employer Occupation Farmers Mutual Hail Ins. Co. VP Claims Receipt For: Aggregate Year-to-Date ▼ Primary General 2 3 9 4 0 Other (specify) Full Name (Last, First, Middle Initial) Krohn, Grant E. В. Date of Receipt Mailing Address 26818 N Avenue Payroll Deduction City State Zip Code Adel, IA 50003 Amount of Each Receipt this Period FEC ID number of contributing C 0 0 1 1 7 6 1 4 1600 federal political committee. Name of Employer Occupation Asst VP Quality Control Farmers Mutual Hail Ins. Co. Receipt For: Aggregate Year-to-Date ▼ Primary General 2.1.6.0.0 Other (specify) Full Name (Last, First, Middle Initial) Liljedahl, Ken C. Date of Receipt Mailing Address Payroll Deduction 8935 Lyndhurst State Zip Code Johnston, IA 50131 Amount of Each Receipt this Period FEC ID number of contributing 0_0_1 17614 federal political committee. Name of Employer Occupation Farmers Mutual Hail Ins. Co. VP Operations Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4

(check only one)

11a 11b 11c 12

13 14 15 16

of **4**

			Detailed Summary Page	13	14 15 16 17			
	information copied from such Reports and Sta			rson for the	purpose of soliciting contributions			
	or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full)							
\	armers Mutual Hail Insurance C	ompany	of Iowa Political Action	Comm	ittee			
 А.	ull Name (Last, First, Middle Initial) Fischer	Date of	of Receipt					
	failing Address 603 13th St. SE			Pay	yroll Deduction			
ō	ity	State	Zip Code		y on Dedderion			
_	Altoona, IA. 50009			Amou	nt of Each Receipt this Period			
fe	EC ID number of contributing ederal political committee.	• •) 1 1 7 6 1 4		26400			
	lame of Employer Farmers Mutual Hail Ins. Co.	Occupation VP HR						
F	Receipt For: Primary	Aggregate	Year-to-Date ▼	7				
	Other (specify)		,,26,4,00					
Б.	full Name (Last, First, Middle Initial) Church	, Lisa		Date of	of Receipt			
	Mailing Address B13 Edgewater Drive			Pay	roll Deduction			
	Polk City, IA 50226	State	Zip Code	Amou	nt of Each Receipt this Period			
	EC ID number of contributing ederal political committee.	C 0 C) 1 1 7 6 1 4		3,0,0,0,0			
	lame of Employer Farmers Mutual Hail Ins. Co.	Occupation R&D Ar						
Ē	Receipt For: Primary General	Aggregate	Year-to-Date ▼					
	Other (specify) ▼		<u>, , , ,3,0,0,0,0</u>					
C	full Name (Last, First, Middle Initial) Anders	on, Cinc	di M	Date	of Receipt			
	Aailing Address 15934 Rosewood Ct			Pa	yroll Deduction			
	Clive, IA 50325	State	Zip Code	Amou	nt of Each Receipt this Period			
	EC ID number of contributing ederal political committee.	C 0 (0 1 1 7 6 1 4		2-12-42-42-42-42-42-42-42-42-42-42-42-42-42			
	lame of Employer Farmers Mutual Hail Ins. Co.	Occupation AVP Cr	op Ins Data Analyst]				
F	Receipt For: Primary General	Aggregate	Year-to-Date ▼					
	Other (specify) ▼	<u> </u>	(1)\ <u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>					
su	BTOTAL of Receipts This Page (optional)				56400			
то	TAL This Period (last page this line number o	nly)			2,689,40			

SCHEDULE B (FEC Form 3X)		FOR LINE N	NUMBER: PAGE 1 OF 1			
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)			
	Detailed Summary Page	21b 27	22 23 24 25 26 28b 28c 29 30b			
Any information copied from such Reports and Statem	lnents may not be sold or use	لـــــــــــــــــــــــــــــــــــــ				
or for commercial purposes, other than using the nam	ne and address of any politica	al committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)						
Farmers Mutual Hail Insurance Con	npany of Iowa Politic	al Action C	Committee			
Full Name (Last, First, Middle Initial)		Date of Dishurasment				
A. Luke Messer for Congress		Date of Disbursement				
Mailing Address 107 W. Charles St.						
City	State Zip Code					
Muncie, IN 47305	r					
Purpose of Disbursement Contirbution		0 1 1	Amount of Each Disbursement this Period			
Candidate Name		Category/				
Luke Messer		Type	2,600,00			
Office Sought: X House Disbursen						
Senate	Primary					
State: IN District: 6th	opouny) ▼					
Full Name (Last, First, Middle Initial)						
B. NAMIC BAC			Date of Disbursement			
NAMIC PAC			0_3 2_8 2_0_1_5			
Mailing Address 122 C. Street NW Suite 540						
City	State Zip Code					
Washington, DC 20001 Purpose of Disbursement						
Contribution		1 1	Amount of Each Disbursement this Period			
Candidate Name		Category/	20000			
Office Sought: House Disbursen	nent For	Туре				
Senate Disburser	Primary General					
President	Other (specify) ▼					
State: District:						
Full Name (Last, First, Middle Initial)			Date of Disbursement			
lowa Industry PAC (IIPAC)			MAM / DAG / VVVV			
Mailing Address			0 4 0 8 2 0 1 5			
400 East Court Avenue	State 7im Code					
City Des Moines, IA 50309	State Zip Code					
Purpose of Disbursement	Purpose of Disbursement					
Contribution Candidate Name	0 1 1	Amount of Each Disbursement this Period				
	Category/ Type	50000				
Office Sought: House Disburser						
Senate President	Primary General					
State: District:	Other (specify) ▼					
SUBTOTAL of Disbursements This Page (optional)			5 1 0 0 0 0			
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Farmers Mutual Ha

Federal Election Com ENVELOPE REPLACEMENT PAGE FOR The FEC added this page to the end of this filing	R INCOMING DOCUMENTS
Hand Delivered	Date of Receipt
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USPS Registered/Certified	Postmarked (R/C) 7/23/15
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USPS Priority Mail Express	
Postmark Illegible No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery
Received from House Records & Registration	Date of Receipt n Office
Received from Senate Public Records Office	
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
	7/29/15
(3/2015)	DATE PREPARED